Hospital Usage Comparisons

	1965	1975	Change
Patient Admissions	3,208	3,431	+7%
Patient Days	26,170	23,628	-9.7%
Average Stay in Days	8.0	6.2	-22.5%
Births	477	480	+.6%
Out-Patient Visits*	7,234	22,178	+207%
Laboratory Examinations	20,829	132,137	+534%
X-Ray Procedures	5,751	12,360	+115%
Respiratory Therapy Treatments	0	4,938	N/A
Physical Therapy Treatments	0	1,895	N/A

*Including Emergency Treatments

Southside Community Hospital: 1927-1976

Since its establishment in 1927 by far-sighted community leaders who recognized a growing need for comprehensive medical care in Southside Virginia, Southside Community Hospital has retained as its constant goal the provision of quality patient care at the lowest possible cost.

During the intervening years, this goal has been continuously achieved, resulting primarily from the involvement and concern of the citizens in the Hospital's seven-county service area. Because of their support, four subsequent additions to the physical plant have been possible, allowing for orderly growth and the application of technological advances in medical practice. Original and added construction costs have amounted to $1,739,000, of which $894,000 (51.4%) was generated from within the area of Amelia, Buckingham, Charlotte, Cumberland, Lunenburg, Nottoway, and Prince Edward Counties.

As a result, thousands of patients, 89% of whom still live in rural areas, have been afforded health service of the highest quality. The quality of this care, administered by an excellent medical staff, can best be attested by the fact that the average patient stay at Southside is now just over six days, substantially lower than at most hospitals. Additionally, because of community commitment to the Hospital over the years, many normal costs have not been reflected on patient bills, resulting in Southside's ability to offer one of the lowest per patient day costs in Virginia.

After nearly a half-century, Southside remains the only acute care facility of its kind in a radius of 50 miles, and the one health agency capable of addressing rural health care problems which must be met. The basic function of the Hospital continues to be that of primary care, although comprehensive facilities and expertise are now available in such specialties as internal medicine and cardiology, general and thoracic surgery, obstetrics and gynecology, otolaryngology, pediatrics, urology, and respiratory and physical therapy.

Despite the enviable record of service established at Southside over five decades, new trends in health care, patient demands, and strict accrediting standards now require that a substantial building program be undertaken. The primary goal of the project is not so much to enlarge patient capacity as to modernize rooms and facilities in such a way as to make possible the continuation of excellent medical care for the region well into the 21st Century.

Construction on the expansion project is well underway and is the result of the diligent work of the Hospital's Board of Managers, various consultants, and specialized architects over the last five years. The cost will be sizable, but, as in the past, the upgrading of care at the Hospital will continue with an eye to sound financial management principles, to assure that costs, which must ultimately be passed to the patient, will be kept at minimal levels.

Increased employment and the purchase of local goods and services during construction will have a temporary effect on the regional economy, but the long-term economic good resulting from the Hospital's increased operating budgets will have far greater impact. By example, of Southside's current budget of $2.6 million, 63% is utilized for salaries and professional fees, the bulk of which remains in the area to serve as a major economic factor.

After 49 years, progress in medical service continues at Southside. In the final analysis, however, the strides made over the years can be proportionately attributed to its area constituency. It is they who have succeeded in providing the resources that have allowed steady growth. Again, such an opportunity exists, that of being able — together — to assure the facilities necessary to meet the health needs of generations to come.

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A New Day and New Challenges

In the early 1970's, Southside Hospital, recognizing the need for a long-range development plan to fully address the medical needs of the area for the next several decades, retained the services of a highly-regarded hospital consulting firm to determine those needs and establish the least expensive approach to their fulfillment. After much study, it was determined that the Hospital's future role would continue to be in primary health care, with an increased emphasis on ambulatory patient services, due to sharp increases in demand, and some medical sub-specialties.

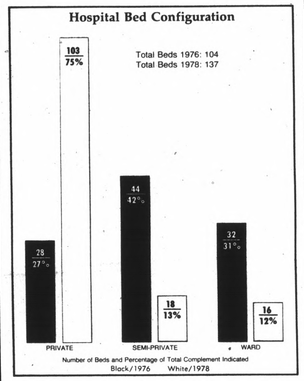
Feasibility studies later established it to be in the best interests of all concerned neither to completely renovate the present facility nor to build at another site. Rather, the most practical and least costly approach would be to erect a modern acute care wing adjacent to the existing facility and, after its completion, to modernize and expand certain areas in the current structure.

It was readily recognized that while the level of patient care administered by the professional staff continued to be superior, many areas of the Hospital could no longer be used in a totally effective and economic manner.

Indicative of the condition of some of the older areas of the Hospital is that of 104 current beds, 59 (56.7%) are located in rooms which fail to meet accrediting standards of today and, by requirement, must be replaced.

Of additional importance is a very noticeable change in patient attitudes concerning private care. Of the total complement, only 28 beds are located in private rooms, the balance being in semi-private or ward configurations. While multi-patient rooms were once appropriate, their usage has declined rapidly, and Southside can no longer even nearly meet the demand for personal accommodations.

These situations have been taken into account in planning the new wing, and private acute care rooms will be available for 92 patients, each room providing an environment in keeping with quality medical care and affording greater patient comfort and safety.



Through careful coordination of design, ancillary service areas for the four-story wing will be located in close proximity to patient rooms, and nursing stations will be centrally situated, with full floor view in all directions. Such capabilities will allow nurses and other personnel to monitor and care for far more patients than is now possible, with greater efficiency and assurance of economy of operation.

Provision for specialized, long-term nursing facilities, greatly needed at the Hospital, will also be assured through current construction. Availability of rooms in the area for these patients, most of them elderly, is already limited and continues to shrink. Many such patients are having to look to facilities well outside the region, causing additional inconvenience and worry to themselves as well as family and friends. Accommodations for such care at Southside are currently limited to more expensive primary care rooms.

Dramatic increases in demand upon emergency room facilities requires that this area be relocated in larger, more modern facilities within the present structure, which will be possible with the advent of the new wing. To establish the need for an expanded center, one need only refer to the accelerated demand for such services — 740% — in the last decade. While expansion of medical staff in this area has assured the Hospital's ability to meet increased loads, current facilities and equipment are taxed at best!

In the total area of ambulatory care, of which emergency service is a part, out-patient visits to the Hospital have increased substantially, despite the lack of a suitable clinic for such purposes. Mainly as a result of

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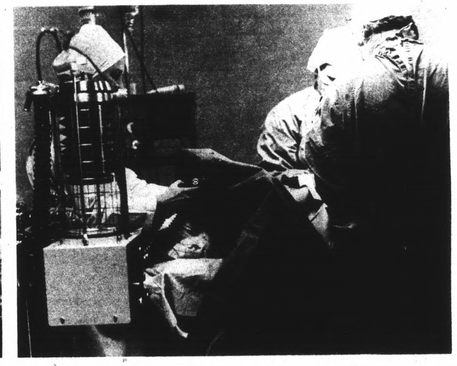

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